



04-12-01

Docket No. 2026-400U

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TECH CENTER 1600/2900

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Schlom, Jeffrey et al

Group Art Unit: 1644

Serial No.: 09/155,590

Examiner: Ewoldt, G.

Filed: September 30, 1998

For: MUTATED RAS PEPTIDES FOR GENERATION OF CD8⁺ CYTOTOXIC T LYMPHOCYTES

EXPRESS MAIL CERTIFICATE

Express Mail Label No.: EL 853178041 US

Date of Deposit: April 11, 2001

I hereby certify that the following attached paper(s) and/or fee

1. Petition and Fee For Extension Time, 2. Amendment Fee Transmittal, 3. Amendment and Response, 4. Exhibit 1 entitled "Amendment of Claims 10-13, 25, 27 and 32-34 With Markings to Show Changes Made", 5. Exhibit 2 - Pogue et al, 6. Exhibit 3 - Rivoltini et al, 7. Check in the amount of \$890.00, and 8. Return Receipt Postcard.

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

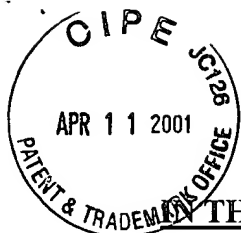
Albert Isles

(Typed or printed name of person mailing papers(s) and/or fee)

(Signature of person mailing paper(s) and/or fee)

Correspondence Address:

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APR 16 2001

TECH CENTER 1600

Docket No. 2026-4230US1

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Schlom, Jeffrey et al

Group Art Unit: 1644

Serial No.: 09/155,590

Examiner: Ewoldt, G.

Filed: September 30, 1998

For: MUTATED RAS PEPTIDES FOR GENERATION OF CD8⁺ CYTOTOXIC LYMPHOCYTES

AMENDMENT FEE TRANSMITTAL

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

☒ No additional fee is required.

☐ The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest No. Covered by Previous Payments	Extra	Rate	Additional Fee
Total Claims*	191 -	431	---	\$18.00/ \$9.00	\$ ---
Independent Claims	1 -	6	---	\$80.00/ \$40.00	\$ ---
Multiple Dependent Claims	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$270.00 to additional fee (\$135 for small entity).				\$ ---
TOTAL					\$ ---

*Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. §1.75(c).

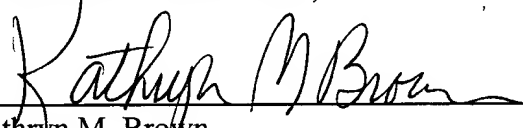
☐ Small entity status is or has been claimed.
Reduced Fees Under 37 C.F.R. §1.9(f) paid herewith \$

- ☐ Charge fee to Deposit Account No. 13-4500, Order No. _____. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for filing this amendment, including all fees pursuant to 37 CFR §1.17 for its timely consideration, or credit any overpayment to Deposit Account No. 13-4500, Order No. 2026-4230US1. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☐ _____ Pages Sequence Listing
- ☐ _____ Computer disk(s) containing substitute Sequence Listing
- ☐ Statement under 37 C.F.R. §1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.
- ☐ A check in the amount of \$_____ to cover the filing fee is attached.

Respectfully submitted,
MORGAN & FINNEGAN, L.L.P.

Dated: April 11, 2001

By: _____


Kathryn M. Brown
Registration No. 34,556

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